

Geriatric Suicide Risk Factors

- **Mood Disorder** Mood problems like depression greatly increase suicide risk
- **Hopelessness** Hopelessness, combined with any other risk factor, greatly increases suicide risk
- **Chronic Pain** Patients with long-term pain problems have an increased suicide risk, with risk increasing with greater pain severity
- **Age** Elderly patients (older than age 75) have a significantly higher suicide risk
- **Lethal Means** Access to a gun creates an increased risk of completed suicide

Pain has taken over my Mind & Body

I need Back Surgery

Left & Right Rotator Cuffs

Right Bicep Torn

Back Surgery to Correct Pain in Legs

Forgive me, I cannot go on like this!

I cannot have my body, the temple
of the Holy Spirit cut on anymore

I have talked to God almighty and

He understands,

Mr. Smith's Suicide Risk Factors

Chronic Pain

Mr. Smith suffered severe chronic pain, which worsened dramatically in the months before his death

Untreated Depression

Mr. Smith was diagnosed with depression before he started Neurontin, and this depression went untreated

Hopelessness

Mr. Smith became hopeless when he was told there were no more options for treating his pain

Suicidal Ideation

Mr. Smith's pain led to suicidal thoughts, which he expressed on at least two occasions before starting Neurontin

Age

Mr. Smith was an elderly white male, part of a group with the highest rate of completed suicide

Access to Firearms

Mr. Smith had access to guns in his home, an important risk factor for suicide

Mr. Smith's Pain Complaints

1988

Dr. Tom Nesbitt

- Rectal **pain** with radiation, began after knee surgery

Spalding & Nesbitt Urology Clinic, 000006-625NUC-00027

1989

Dr. James Cato

- Hand tightness; decreased grip
Heritage Medical Associates, 000006-1PRD-00009
- Pelvic **pain**
Heritage Medical Associates, 000006-42HMA-00216

Dr. Stewart F. Stowers

- Right heel **pain**; right knee **pain**
Nashville Orthopedic Associates, 000006-69AQC-00077
- Bilateral knee **pain**
Nashville Orthopedic Associates, 000006-69AQC-00076
- Right hip **pain**
Nashville Orthopedic Associates, 000006-69AQC-00076
- Suprapubic **pain** [groin area]
Nashville Orthopedic Associates, 000006-69AQC-00075

1990

Dr. Stewart F. Stowers

- Left hip **pain** extending to groin
Nashville Orthopedic Associates, 000006-69AQC-00074

Dr. James Cato

- Back **pain**; upper abdominal burning; tiredness
Heritage Medical Associates, 000006-42HMA-00217
- Left jaw and ear pressure/
soreness; left facial numbness
Heritage Medical Associates, 000006-1PRD-00013

Dr. Tom Nesbitt

- Testicular **pain**
Spalding & Nesbitt Urology Clinic, 000006-625NUC-00025

Dr. David M. Dyer

- Chronic right groin/
testicular **pain**
000006-625NUC-00055

1991

Dr. David M. Dyer

- Left groin **pain**
000006-625NUC-00054

Dr. James Cato

- Left jaw, throat, and ear pressure
Heritage Medical Associates, 000006-1PRD-00015-16
- Left shoulder complaints; left hip soreness
Heritage Medical Associates, 000006-1PRD-00015-16

1992

Dr. Michael Santi

- Chronic abdominal **pain**
Colon & Rectal Surgery Associates, 000006-48CRSA-00009

1993

Dr. Stewart F. Stowers

- Severe left knee problems;
pain in left ankle
Nashville Orthopedic Associates, 000006-69AQC-00071

Dr. James Cato

- Swelling in hands and ankles; left knee problems
Heritage Medical Associates, 000006-42HMA-00220
- Tenderness in left ribs
Heritage Medical Associates, 000006-1PRD-00022

1994

Dr. Stewart F. Stowers

- Left knee tightness; **pain** in left ankle

Nashville Orthopedic Associates, 000006-69AQC-00064

1995

Dr. James Cato

- Numbness to left side of face/
eye; left tooth problems
Heritage Medical Associates, 000006-1PRD-00023
- Left chest soreness
Heritage Medical Associates, 000006-42HMA-00223

Dr. David M. Dyer

- Left groin **pain**
000006-30HMA-00072

Dr. Stewart F. Stowers

- Left knee ache
Tennessee Orthopedic Associates, 000006-69AQC-00063

1996

Dr. Stewart F. Stowers

- Severe right hip **pain**
Tennessee Orthopedic Associates, 000006-69AQC-00062

Dr. Eugene M. Regan Jr.

- Right hip and groin **pain**;
significant limp
Tennessee Orthopedic Alliance, 000006-69AQC-00061

- Difficulty sleeping because
of hip **pain**
Tennessee Orthopedic Alliance, 000006-69AQC-00061

Left shoulder problems

Tennessee Orthopedic Alliance, 000006-32TOA-00047

Vicki Bryant, P.T.

- Low back **pain**; foot symptoms
000006-69AQC-00133

Dr. James Cato

- Lower abdominal **pain**
Heritage Medical Associates, 000006-30HMA-00029

- Chest **pain**; arm tingling;
numbness to left side of face
Heritage Medical Associates, 000006-30HMA-00030

1997

Dr. Tom Nesbitt

- Difficulty urinating, with burning
Spalding & Nesbitt Urology Clinic, 000006-625NUC-00021

RAH

- Lower abdominal **pain**
Colon & Rectal Surgery Associates, 000006-48CRSA-00006

- Pressure in rectum, scrotum,
and groin
Colon & Rectal Surgery Associates, 000006-48CRSA-00006

Dr. Eugene M. Regan Jr.

- Right knee **pain**, low back **pain**;
left knee tightness
Tennessee Orthopedic Alliance, 000006-32TOA-00046

Dr. Tom Nesbitt

- Testicular **pain**; erectile
discomfort
Spalding & Nesbitt Urology Clinic, 000006-625NUC-00018

1998

Dr. James Cato

- Chest discomfort; facial soreness
Heritage Medical Associates, 000006-30HMA-00032-33

Dr. Eugene M. Regan Jr.

- Left ankle **pain**
Tennessee Orthopedic Alliance, 000006-32TOA-00044-45
- Increasing right knee **pain** with
significant limp
Tennessee Orthopedic Alliance, 000006-32TOA-00044-45

Dr. James Cato

- Left shoulder soreness and
biceps tenderness
Heritage Medical Associates, 000006-30HMA-00036-37
- Pain** under rib cage
Heritage Medical Associates, 000006-42HMA-00116-117

Dr. Stewart F. Stowers

- Right knee stiffness
Tennessee Orthopedic Associates, 000006-32TOA-00023

Baptist Hospital ER

- Rib **pain**; shoulder **pain**; chest
pain; abdominal **pain**
000006-78BAH-00019

Mr. Smith's Pain Complaints

2000

2001

2002

2003

2004

Dr. Stewart F. Stowers

- Left sacroiliac **pain** [hip/buttocks region]
Tennessee Orthopedic Alliance, 000006-69AQC-00022
- Left knee flare-up; ankle soreness
Tennessee Orthopedic Alliance, 000006-69AQC-00021

Dr. James Cato

- Left knee **pain**
Heritage Medical Associates, 000006-30HMA-00042-43

Dr. Tom Nesbitt

- Groin **pain**
Spalding & Nesbitt Urology Clinic, 000006-625NUC-00014

Dr. Stewart F. Stowers

- Left shoulder **pain**
Tennessee Orthopedic Alliance, 000006-32TOA-00022
- Left knee **pain**
Tennessee Orthopedic Alliance, 000006-69AQC-00016
- Left knee and left ankle **pain**
Tennessee Orthopedic Alliance, 000006-69AQC-00015

Dr. James Cato

- Pain** across shoulder blades
Heritage Medical Associates, 000006-30HMA-00048-49
- Neck **pain** and stiffness; vertigo
Heritage Medical Associates, 000006-30HMA-00050-51
- Neck/shoulder **pain** and spasms; rib soreness; poor sleep
Heritage Medical Associates, 000006-30HMA-00052-53
- Chest soreness
Heritage Medical Associates, 000006-30HMA-00054-55

Dr. Gregory Mowery

- Vertigo; balance problems
Otolaryngology Associates of Tennessee, 000006-110AT-00001

Dr. Tom Nesbitt

- Groin **pain**
Spalding & Nesbitt Urology Clinic, 000006-625NUC-00013

Dr. Stewart F. Stowers

- Left shoulder **pain** and weakness
Tennessee Orthopedic Alliance, 000006-32TOA-00021
- Left knee **pain**
Tennessee Orthopedic Alliance, 000006-32TOA-00021

Dr. Tom Nesbitt

- Intermittent groin **pain**
Spalding & Nesbitt Urology Clinic, 000006-625NUC-00012

Dr. Stuart E. Smith

- Global **pain** and stiffness
Tennessee Orthopedic Alliance, 000006-69AQC-00005

Dr. Jeffrey P. Lawrence

- Left shoulder **pain** and inability to lift arm
Premier Orthopaedics & Sports Medicine, 000006-120POS-00007

Dr. Tom Nesbitt

- Intermittent groin **pain; pain** with urination
Spalding & Nesbitt Urology Clinic, 000006-625NUC-00011

Dr. Michael Santi

- Lower abdominal **pain**
Colon & Rectal Surgery Associates, 000006-48CRSA-00005

Dr. James Cato

- Sore joints; bladder/prostate symptoms
Heritage Medical Associates, 000006-30HMA-00058-59

- Pain** in all joints; not sleeping
Heritage Medical Associates, 000006-30HMA-00060-62

- Joint **pain**; back **pain/numbness/tingling**
Heritage Medical Associates, 000006-42HMA-00140-141

- Anxiety and depression
Heritage Medical Associates, 000006-30HMA-00063-64

- Nerve prickling down back; **pain** in legs, knees, ankles after lumbar surgery
Heritage Medical Associates, 000006-30HMA-00063-64

- Right hamstring spasm
Heritage Medical Associates, 000006-30HMA-00065-66

Dr. Michel McDonald

- Arthritis
Vanderbilt University Medical Center, 000006-40VUM-00009

Dr. Stuart E. Smith

- Pain** in buttocks radiating to calves
Tennessee Orthopedic Alliance, 000006-69AQC-00006

- Bilateral hip and knee **pain**
Tennessee Orthopedic Alliance, 000006-69AQC-00006

Dr. Carl Hampf

- Hip, back, and bilateral leg **pain** and paresthesia
000006-53CAH-00003-4

- Frequent joint **pain**, even in replaced joints
000006-1PRD-00162-165

- Depressed because of **pain** and lack of sleep
000006-1PRD-00162-165

2003

Dr. Frank M. Berklaich

- Significant low back and bilateral leg **pain**
000006-18FMB-00002-3

- Numbness and pins/needles in both legs
000006-18FMB-00002-3

- Weakness and difficulty walking
000006-18FMB-00002-3

- Sleep impaired by **pain**
000006-18FMB-00002-3

- Diarrhea due to anxiety and **pain**
000006-52FMB-00041

Dr. Paul R. McCombs III

- Back and bilateral leg **pain**
Neurosurgical Associates, 000006-34NEA-00021

- Back and bilateral leg **pain** symptoms unchanged
Neurosurgical Associates, 000006-34NEA-00020

- Severe low back and leg **pain** after lumbar surgery
Neurosurgical Associates, 000006-1PRD-000408

- Continues with **pain** and is very concerned
Neurosurgical Associates, 000006-1PRD-000408

- Wishes he could die because of **pain** and depression
Neurosurgical Associates, 000006-1PRD-000408

- Increased leg **pain** after lumbar surgery
Neurosurgical Associates, 000006-34NEA-00001

Dr. Jeffrey L. Herring

- Right ankle **pain**
Tennessee Orthopedic Alliance, 000006-69AQC-00003

Powers Chiropractic Clinic

- Right shoulder **pain**
000006-120MAC-00002-3

Neurosurgical Associates

- Shocking sensation in bilateral legs
000006-34NEA-00002

Dr. James Cato

- Pain** from back to ankles
Heritage Medical Associates, 000006-42HMA-00097

Dr. William A. Shell

- Persistent low back **pain** since lumbar surgery
Tennessee Orthopedic Alliance, 000006-32TOA-00002-3

Bilateral radiating leg **pain**

- Tennessee Orthopedic Alliance, 000006-32TOA-00002-3

Dr. Edward S. Mackey

- Increasing left leg **pain**
Tennessee Orthopedic Alliance, 000006-32TOA-00004

Thoracic spine **pain**

- Tennessee Orthopedic Alliance, 000006-32TOA-00015-16

Back and radicular **pain; knee pain**

- Tennessee Orthopedic Alliance, 000006-32TOA-00005, 9

Knee **pain**; worsening bilateral leg **pain**, using wheelchair, not sleeping well

- Tennessee Orthopedic Alliance, 000006-32TOA-00007

Dr. Tom Nesbitt

- Difficulty urinating since back surgery
Spalding & Nesbitt Urology Clinic, 000006-625NUC-00009

Pam Krancer, R.N., C.S., CRN

- Bilateral leg **pain** radiating from buttocks, perineal area (groin), and thigh to knees
Neurosurgical Associates, 000006-34NEA-00003

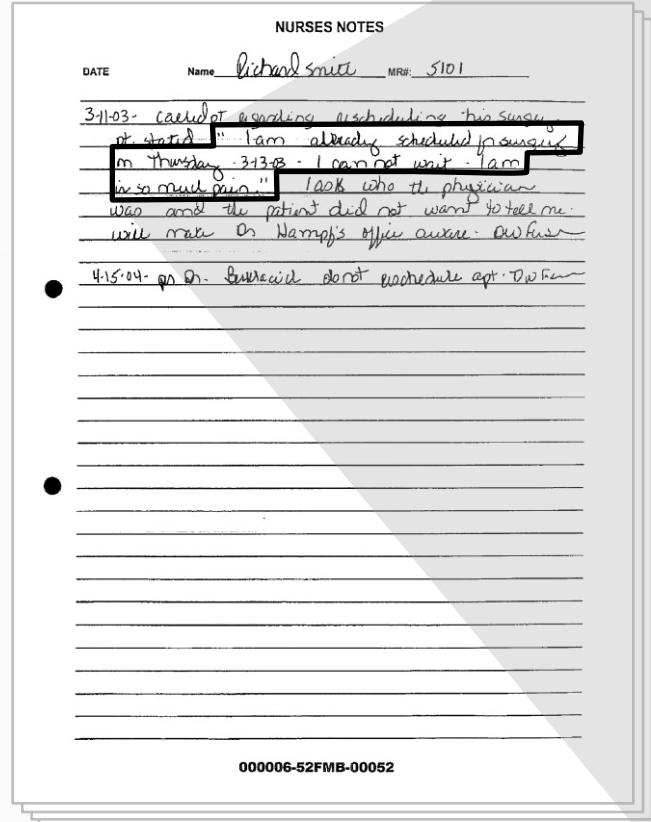
Physical Therapy Evaluation

- Pain/tingling** from lumbar spine to ankle; left groin **pain**
University Medical Center, 000006-35UMC-00058

- Pain** in knees and ankles; **pain** excruciating and sharp
University Medical Center, 000006-35UMC-00076

March 11, 2003

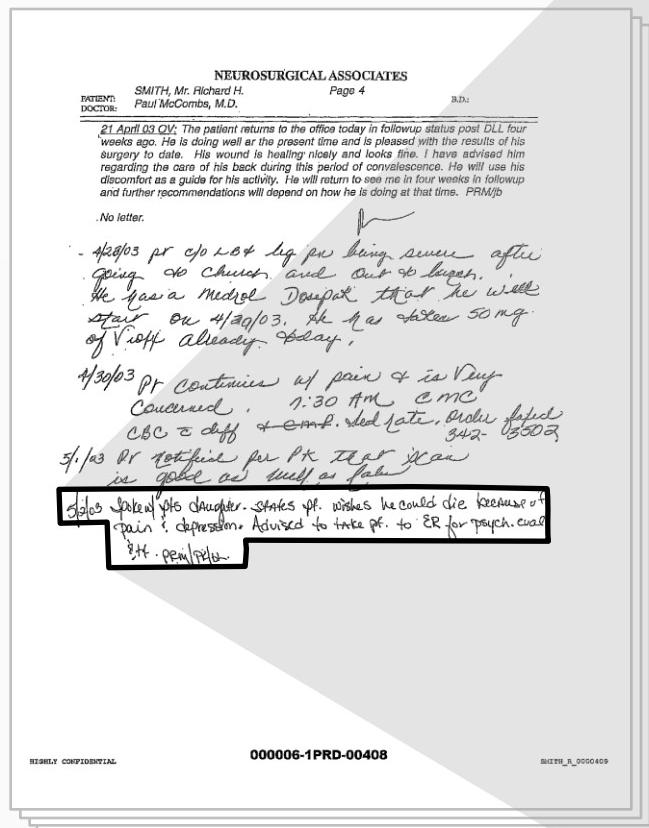
Nurses Notes – Dr. Berklacich



“I am already scheduled for surgery on Thursday 3-13-03 – I cannot wait – I am in so much pain.”

May 2, 2003

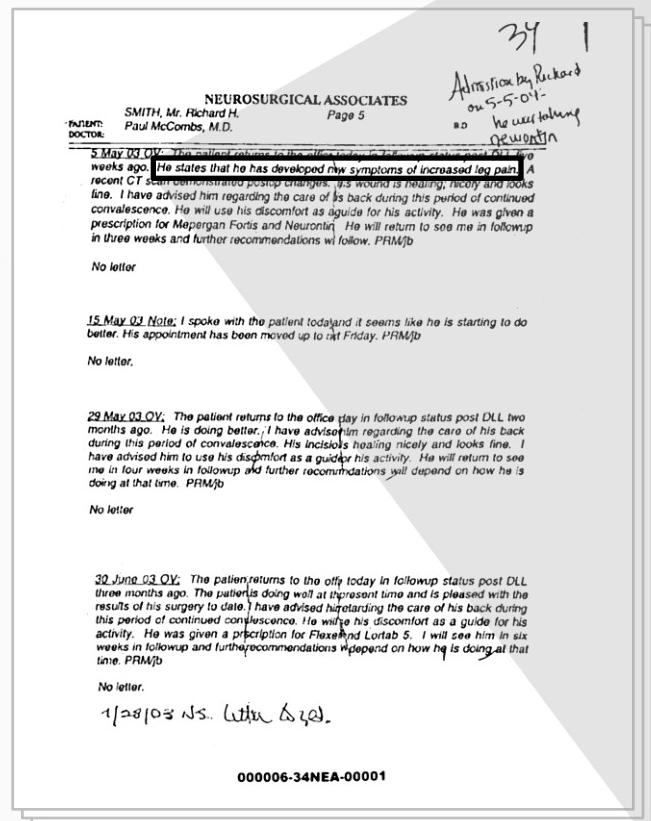
Neurosurgical Associates Notes – Dr. McCombs



Spoke w[ith] p[atiens]t's daughter. States p[atiens]t wishes he could die because of pain and depression. Advised to take p[atiens]t to ER for psych. eval and tx [treatment].

May 5, 2003

Neurosurgical Associates Notes – Dr. McCombs



He states that he has developed new symptoms of increased leg pain.

May 15, 2003

Dr. Cato's Notes

Richard Smith, M.D. CORP Date 5/15/03
781004 10A30 US NIB
AD native speaking client, history M.d.m.
had back pain in last few weeks
had back 3/09 4-1
having a lot of pain
now & ankles hurt

Name:	Richard Smith	SPRING:	Mr. CORP	Date:	5/15/03
ID#:	781004	MRN:	10A30	DRG:	US
Adm:	AD	Native Speaking Client:	Yes	M.d.m.:	NIB
Had back pain in last few weeks					
had back 3/09 4-1					
having a lot of pain					
now & ankles hurt					

Physical Examination

General: Drowsiness, Headache

ENT: Clear airways, no rhinorrhea, no conjunctivitis.

Respiratory: Deep breathing, clear breath sounds.

Cardiovascular: No murmur, regular pulse.

Gastrointestinal: No abdominal tenderness, normal bowel sounds.

Urinary: No urgency, frequency, dysuria.

Musculoskeletal: Back pain, right side more prominent.

Neurological: Normal reflexes, gait normal.

Psych: Alert, oriented, no focal deficits.

Male GU: Unremarkable. Client is circumcised, no masses.

Pelvic: Unremarkable.

Lymph: Unremarkable.

Hematology: Unremarkable.

Skin: Unremarkable.

Nausea: No nausea, vomiting.

Psych: Alert, oriented, no focal deficits.

Medications:

Vietxx 12.5 mg

Aldomet 10 mg

Levofloxacin 500 mg

Form 00006-30HMA-00064

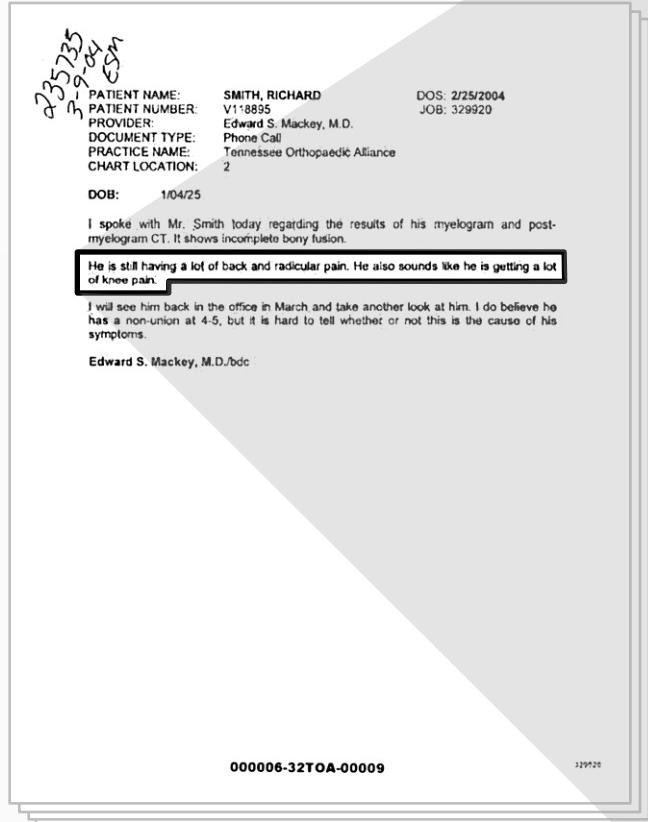
lost laminectomy done	black pain	white
Aldomet		
Vietxx 12.5		
Levofloxacin 500 mg		
Levofloxacin 500 mg		

Had back 3/09 4-1
Having a lot of pain
now & ankles hurt

lost laminectomy done
Back pain
Aldomet
Vietxx 12.5
Levofloxacin 500 mg
Lexapro 10 mg

February 25, 2004

Dr. Mackey's Note



He is still having a lot of back and radicular pain. He also sounds like he is getting a lot of knee pain.

March 24, 2004

Pam Krancer's Notes (Dr. McCombs' Nurse Practitioner)

NEUROSURGICAL ASSOCIATES			
PATIENT:	SMITH, Mr. Richard	Page 7	B.D.:
DOCTOR:	Paul McCombs, M.D.		
<p>3/24/04 OV: The patient is seen in the office at the request of his wife. He is again having bilateral leg pain that radiates down his buttocks, perineal area, anterior part of his thigh and down to his knee. It does not go any further. He has difficulty with standing and ambulation. He went to see Dr. Mackey and Dr. Howell. After they worked him up they would not see him because he would not let them do his initial surgery. Review of the reports shows that he has stenosis at L2-3 and Dr. Mackey told him that it is recorded there is a break off of his fusion material that is encroaching some of the nerves in his lower back. Review of the CT and post myelogram shows spinal stenosis above his fusion site. I have discussed at length a treatment plan. He will have an ESI and start Neurontin 300 mg. po tid. He will followup with Dr. McCombs. He will also have an EMG per Dr. Clinton.</p> <p>On exam he has a positive SLR at approximately 60 degrees for posterior thigh pain. He has had bilateral knee replacements and therefore it is difficult to evaluate knee reflexes. He has decreased ankle jerks in both legs. He denies any urinary or bowel incontinence. PRM/jb</p> <p><i>[Handwritten signature]</i></p> <p>3/31 March 04 OV: The patient returns to the office today in followup. He had been seen by his orthopedist who sent him to Dr. Mackey who ordered a myelogram study. Dr. Mackey did not feel that the patient needed additional surgery. The patient was referred back here. His myelogram study demonstrated no nerve compromise. His EMG study demonstrated bilateral L5 and S1 radiculopathy which would explain his hip and leg pain. He is not a candidate for any type of operative intervention. He will be treated conservatively. He was instructed to take Ibuprofen 600 mg. t.i.d. and was given a prescription for Loratab to take as needed #45 with two refills. PRM/jb</p> <p>No letter</p> <p>5/3/04 pt called c/o <i>[Handwritten signature]</i> sticking feeling in buttocks & legs. He stated that he is taking advil; he stated he has no relief. He is Neurontin, Loratab w/o success but that having P.T. as planned but that pain helped so far. <i>[Handwritten note: Seen by Dr. Schmid]</i> ESI has been authorized by Dr. Schmid but pt does not want to do this now but pt does not want to do this now. Will call pt if he decides to do it. Advantage of ESI as late date.</p> <p>000006-34NEA-00003</p>			

3/24/04 OV: ... He is again having bilateral leg pain that radiates down his buttocks, perineal area, anterior part of his thigh and down to his knee. ... He has difficulty with standing and ambulation. ...Dr. Mackey told him that it is recorded there is a break off of his fusion material that is encroaching some of the nerves in his lower back. ... He will have an ESI and start Neurontin 300 mg. po tid.

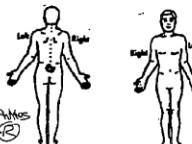
May 4, 2004

Physical Therapy Notes

UMC Pain Center - Physical Therapy Services • Daily Treatment / Progress Notes
Patient Name: Richard Smith Date: 5/4/04 Physician: Dr. McCombs

SUBJECTIVE:

Knee & Patella hurt (R)



Pain Scale 0-10

Frequency:	Increased	Decreased	No Change	Intermittent	Constant
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Quality:

A=Dull	B=Sharp	C=Throbbing	D=Burns	E=Radiates	F=Numb
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down to score

Other: Doing back bends, down for pain, right leg plantar flexes difficult, sleep

OBJECTIVE:

Pelvic Alignment: Supine: Short Long Long Sitting: Short Long Other: Manual Therapy 97140 Areas Treated: Low back, TFL area, Osteal Apophysis, gluteus OF the Sacrum Spine

Soft Tissue Mobilization Myofascial Release Strain Counterstrain Techniques Positional Release Techniques AROM / soft tissue mobilization / gentle stretch PROM / Mobilization Address Facet / rib dysfunction Other:
 Therapeutic Activities 97530

AROM / AAROM Muscle Energy Techniques Coordination / Proprioceptive Training Neuromuscular Re-Education McKenzie Techniques Other:
 1:1 Therapeutic Exercise 97110 Group Therapeutic Exercise 97150 Rx: Squat = Dribbling

Therapeutic Exercise See Attached Thores Sheet Instruct / Perform / Review Self-treatment techniques Instruct / Perform / Review Home Exercise Program Postural Re-education / Body Mechanics Instruct / Patient Family Education Other:
 000006-35UMC-00076

Pain Scale 0-10

0=No Pain

1-2=mild pain

3-4=discomforting

5-6=distressing

7-8=excruciating

9-10=horrible

May 19, 2004

Letter of Dr. Christopher Woods

CHRISTOPHER L. WOOD, D.D.S.
1805 17TH AVENUE SOUTH
NASHVILLE, TENNESSEE 37212-2206
TELEPHONE 615-467-2884

May 19, 2004

Mr. Smith came in to see us on Monday, May 10th at 11:30. He called earlier not reaching us because a squirrel shorted out the transformer in our alley and shut power off from 7 until 9am that morning. Ann recounted he phoned my home to find what was going on. Excuse or not, normally Mr. Smith would have never allowed that to go without some heck yet I thought it seemed it was not mentioned.

Mr. Smith was still troubled by back pain and immediately told me that an end to pain seemed to be hopeless. He mentioned trying to get second opinions but each orthopedic physician he saw seemed to tune him out after hearing he already had surgery. "It was like they were all protecting each other." I made the suggestion he consider clinics outside Tennessee but he did not answer. Finally he simply said "I wish I had never had the surgery in the first place." "I cannot cut the grass, work on cars – you know I used to like you do all the time." "Now I am almost useless."

We both gave him some encouragement, commending his game attitude when she looked and he complained they seemed to burn. I believe he was concerned about cancer or some other pathology. Upon examination I reassured him they were normal. "Well, what would cause them to burn?" Food allergy, certain toothpastes. With that we discussed several. He said he used Colgate Total since we recommended it years ago. I suggested he change to Aquafresh just in case the ingredients were causing the burning sensation. Recounting past occurrences and he seemed interested and would do that. Also mentioned drugs... with that Mr. Smith said well I am on a lot of drugs. You know anything about Neurontin? I shook my head, not really except it is a good drug for neuropathy. "It is extremely powerful, has many side effects, and is very powerful, with numerous side effects. Plus it makes me feel weird and isn't helping me. Mr. Smith had mandibular exostosis which are small benign bony protuberances just below the teeth but do appear as swelling with blanched tissue over them. I explained this and that the tissue overlaying is extremely delicate, easily traumatized by a stiff toothbrush bristle, rough or sharp foods, and so on. After a few other suggestions we concluded.

Mr. Smith limped a little upon getting up to leave and appeared to have some discomfort as he made his way out. This visit I noted he didn't joke or have that usual smile he would flash after launching a few basic comments directed at me. When he stood erect it appeared he had lost an inch or two in height, as I always had to stand erect to look him straight eye to eye. I asked about Donna and he paused, "say a little prayer for Donna". There was obvious concern in his eyes and I could tell it was probably of more concern than his own health. Those were his last words to me.

We all were distraught to hear the news when Pat called me last Thursday morning. Speechless pretty much summed up our reactions then that numb nausea that immediately invades the stomach when something happens to a person close and you really care about. Our concern about you and the entire family continues as we will continue to honor Mr. Smith's last request and see Donna through her battle with cancer. Maintain a positive attitude!

Sincere regards,
Chris

000006-19CLW-00001

Mr. Smith was still troubled by back pain and immediately told me that an end to pain seemed to be hopeless. He mentioned trying to get second opinions but each orthopedic physician he saw seemed to tune him out after hearing he already had surgery. "It was like they were all protecting each other." I made the suggestion he consider clinics outside Tennessee but he did not answer. Finally he simply said "I wish I had never had the surgery in the first place." "I cannot cut the grass, work on cars – you know I used to like you do all the time." "Now I am almost useless."

February 27, 2003

Neurological Surgeons Questionnaire

12/27/2002 1:24 PM NEUROLOGICAL SURGEON NO. 964 P. 5
1/27/2003 1:27PM NO. 160 P. 5
131683-9

NEUROLOGICAL SURGEONS

New Patient Medical Questionnaire

This is a simple form and we appreciate its length.

It is important for you to carefully complete it, but if you need to take it home to complete the total time for you.

Name: Richard H Smith Address: 1000 W 3rd St, Suite 200, Austin, TX 78701 NO. 964 P. 5
Address: 1000 W 3rd St, Suite 200, Austin, TX 78701 NO. 160 P. 5
Housing Doctor and address: Dr. Paul R. Goff, 2200 S. Congress Ave., Austin, TX 78704
Doctor you are seeing today: Dr. Hough

Do you have a long list? Yes Do you have an reduced deductible? No If you do have a long list or an extended deductible please provide us with it as soon as possible.

Present Problem:

1. What symptoms do you want the Doctor today? Please describe your symptoms and length of time you have had them.
Sore pain in my neck, down back and thighs, down into my shoulder, sometimes out of spine. Tingling - Head to waist. Tired to right leg after sitting for an hour. Can't sleep at night.
 2. How long has this problem been? 8 weeks Now 8 weeks

1/27/2003 1:27PM NEUROLOGICAL SURGEON NO. 964 P. 11
1/27/2003 1:27PM NO. 160 P. 8
131683-9 484

Migraine headaches
 Frequent episodes of joint pain, swelling, last 8 weeks - Burns in replaced joints
 Severe back pain
 Constant or leg pain with walking
GENERAL
 Bladder or bladder empty
 Any change in mood Depressed because of pain + lack of sleep
 Trouble sleeping With new cat, gave out. Hydrocodone.
 Enclosed are your test results.

Any change in mood Depressed because of pain + lack of sleep

HIGHLY CONFIDENTIAL 000006-1PRD-00162

Report disease							
High blood pressure	X	X					
Stroke							
Kidney disease							
Breast cancer			X		X		
Prostate cancer							
Colon cancer	X						
Psychiatric illness							
Anemia							

Social History

Do you use tobacco? No How much and how long?

Do you use alcohol? No How much and how long?

Education? High School

Vocation? Repair office equipment Bill working? Retired

Are you exposed to latex? No

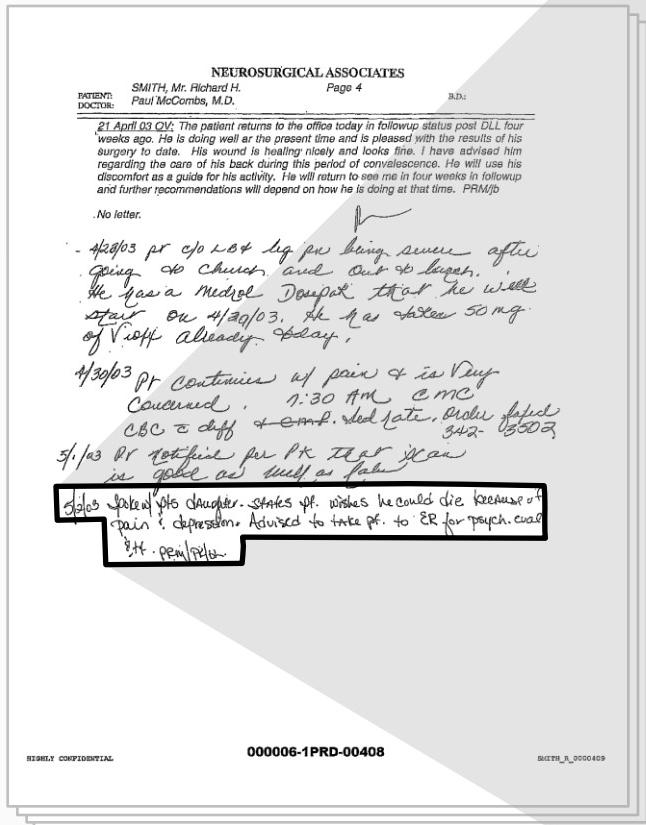
Physician's Signature DH Date 2/27/03

000006-1PRD-00165

SMITH_R_0000166

May 2, 2003

Neurosurgical Associates Notes – Dr. McCombs



Spoke w[ith] p[atiens]t's daughter. States p[atiens]t wishes he could die because of pain and depression. Advised to take p[atiens]t to ER for psych. eval and tx [treatment].

May 15, 2003

Dr. Cato's Notes

Name: Richard Smith	SPRING	Mr. CORP Date: 5/15/03
781004	10A30	UR NIB
ADT native speaking client, history M.d.m.		
Brought man in last night for back pain		
Had back spasm 4-1		
Having a lot of pain		
Spells of anxiety last		

L1 L2 L3 L4 L5 L6 L7 L8 L9 L10	
L12 L13 L14 L15 L16	
L17 L18 L19 L20 L21 L22 L23 L24 L25 L26	
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June 27, 2003

Dr. Cato's Notes

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<p><u>Review of Systems</u></p> <table border="1"> <tr> <th></th> <th>None</th> <th>Positive</th> <th>Check if Yes (initial)</th> <th>Initial</th> </tr> <tr> <td>Constitutional</td> <td>N</td> <td>fever w/loss wt gain</td> <td>fatigue elevated BP</td> <td></td> </tr> <tr> <td>Eyes <input checked="" type="checkbox"/></td> <td>N</td> <td>redness discharge</td> <td>sharp change in vision</td> <td></td> </tr> <tr> <td>ENT</td> <td>N</td> <td>sore throat</td> <td>hoarseness</td> <td></td> </tr> <tr> <td>Respiratory</td> <td>N</td> <td>cough</td> <td>shortness of breath</td> <td></td> </tr> <tr> <td>Cardiovascular</td> <td>N</td> <td>pounding heart</td> <td>palpitations</td> <td>PND</td> </tr> <tr> <td>Gastrointestinal</td> <td>N</td> <td>nausea/vomiting</td> <td>abdominal pain</td> <td></td> </tr> <tr> <td>Genitourinary</td> <td>N</td> <td>frequency</td> <td>blood in urine</td> <td>ankle pain nocturia</td> </tr> <tr> <td>Musculoskeletal</td> <td>N</td> <td>aches</td> <td>joint pain</td> <td>stiffness impotence</td> </tr> <tr> <td>Musculoskeletal</td> <td>N</td> <td>back pain</td> <td>myalgia</td> <td>joint swelling</td> </tr> <tr> <td>Neurologic</td> <td>N</td> <td>seizures</td> <td>headache</td> <td>decreased reflexes</td> </tr> <tr> <td>Psychiatric</td> <td>N</td> <td>anxiety</td> <td>depression</td> <td>confusion</td> </tr> <tr> <td>Endocrine</td> <td>N</td> <td>polyuria</td> <td>polydipsia</td> <td>weight changes</td> </tr> <tr> <td>Hematologic</td> <td>N</td> <td>skin bleeding</td> <td>abl bruising</td> <td>petechiae</td> </tr> <tr> <td>Skin/Breast</td> <td>N</td> <td>nodes</td> <td>itching</td> <td>blister/mass</td> </tr> <tr> <td>Allergy</td> <td>N</td> <td>anaphylaxis</td> <td>asthma</td> <td>hives</td> </tr> </table> <p><u>Review of Systems</u></p> <input type="checkbox"/> normal <input type="checkbox"/> other _____						None	Positive	Check if Yes (initial)	Initial	Constitutional	N	fever w/loss wt gain	fatigue elevated BP		Eyes <input checked="" type="checkbox"/>	N	redness discharge	sharp change in vision		ENT	N	sore throat	hoarseness		Respiratory	N	cough	shortness of breath		Cardiovascular	N	pounding heart	palpitations	PND	Gastrointestinal	N	nausea/vomiting	abdominal pain		Genitourinary	N	frequency	blood in urine	ankle pain nocturia	Musculoskeletal	N	aches	joint pain	stiffness impotence	Musculoskeletal	N	back pain	myalgia	joint swelling	Neurologic	N	seizures	headache	decreased reflexes	Psychiatric	N	anxiety	depression	confusion	Endocrine	N	polyuria	polydipsia	weight changes	Hematologic	N	skin bleeding	abl bruising	petechiae	Skin/Breast	N	nodes	itching	blister/mass	Allergy	N	anaphylaxis	asthma	hives
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A/D – doing well.
Overall improved.
Sleeping OK.
Off Lexapro – ran out.
Overall improved.

Pain has taken over my Mind & Body

I need Back Surgery

Left & Right Rotator Cuffs

Right Bicep Torn

Back Surgery to Correct Pain in Legs

Forgive me, I cannot go on like this!

I cannot have my body, the temple
of the Holy Spirit cut on anymore

I have talked to God almighty and

He understands,

March 31, 2004

Dr. McCombs' Notes

NEUROSURGICAL ASSOCIATES

PATIENT: SMITH, Mr. Richard Page 7 B.O.:
DOCTOR: Paul McCombs, M.D.

3/24/04 OV: The patient is seen in the office at the request of his wife. He is again having bilateral leg pain that radiates down his buttocks, perineal area, anterior part of his thigh and down to his knee. It does not go any further. He has difficulty with standing and ambulation. He went to see Dr. Mackey and Dr. Howell. After they worked him up they would not see him because he would not let them do his initial surgery. Review of the reports shows that he has a stenosis at L2-3 and Dr. Mackey told him that it is recorded there is a break off of his fusion instrument that is encroaching some of the nerves in his lower back. Review of the CT and post myelogram shows spinal stenosis above his fusion site. I have discussed at length a treatment plan. He will have an ESI and start Neurontin 300 mg po tid. He will followup with Dr. McCombs. He will also have an EMG ner Dr. Clinton.

On exam he has a positive SLR at approximately 60 degrees for posterior thigh pain. He has had bilateral knee replacements and therefore it is difficult to evaluate knee reflexes. He has decreased ankle jerks in both legs. He denies any urinary or bowel incontinence. Pk/b

31 March 04 OV: The patient return to the office today in followup. He had been seen previously by Dr. Markowitz for his myelogram study. Dr. Markowitz did not feel that the patient needed additional surgery. The patient was referred back here. His myelogram study demonstrated no nerve compromise. His EMG study demonstrated bilateral L5 and S1 radiculopathy which would explain his hip and leg pain. He is not a candidate for any type of operative intervention. He will be treated conservatively. He was instructed to take ibuprofen 600 mg. l.t.d. and was given a prescription for Loratab as needed #45 with two refills. PR/Mjb

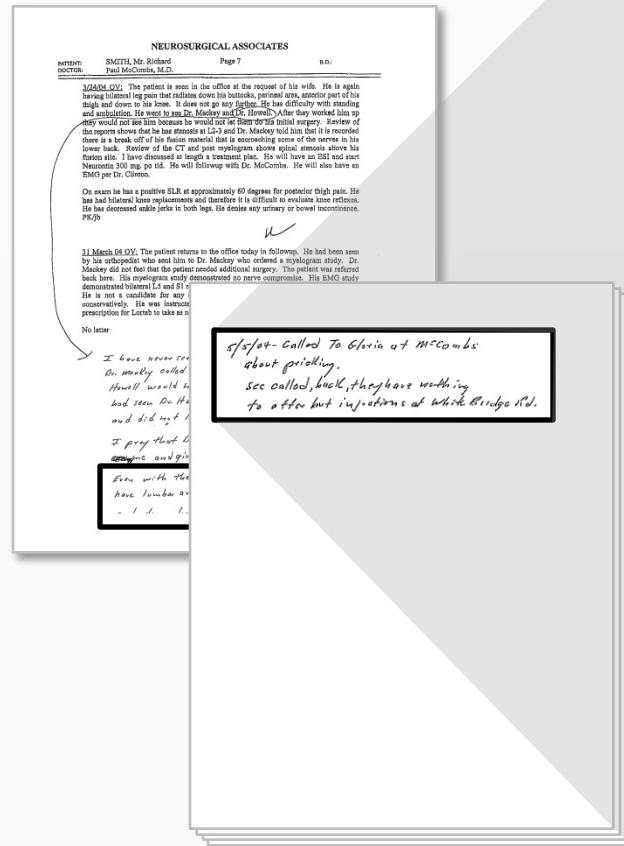
No letter

5/3/64 Pt called c/o picturing a
sticking feeling in buttocks & legs.
He stated that he is taking Adril;
Neurotonic, Lutab up no relief. He is
having P.T. at present but that
point helped so far.
ESI has been discontinued by ~~Home School~~
but pt does not want to do this now.
Will call back if he decides to take
Advantage of ESI at later date.

31 March 04 OV: ... He had been seen by his orthopedist who sent him to Dr. Mackey who ordered a myelogram study. Dr. Mackey did not feel that the patient needed additional surgery. ... He is not a candidate for any type of operative intervention. He will be treated conservatively.

May 5, 2004

Dr. McCombs' Notes With Annotations by Mr. Smith



Even with the medication, I still have lumbar area back pain, buttocks...back of legs to my ankles.

5/5/04 – called to Gloria at McCombs' about pricking. Sec called back, they have nothing to offer but injections at White Bridge Rd.

911 Call Tape Transcript



Smith: Oh, oh. I don't know. Oh, oh, oh. I never knew his life would end this way, but he's been in so much pain.

Operator: So, he has been sick?

* * *

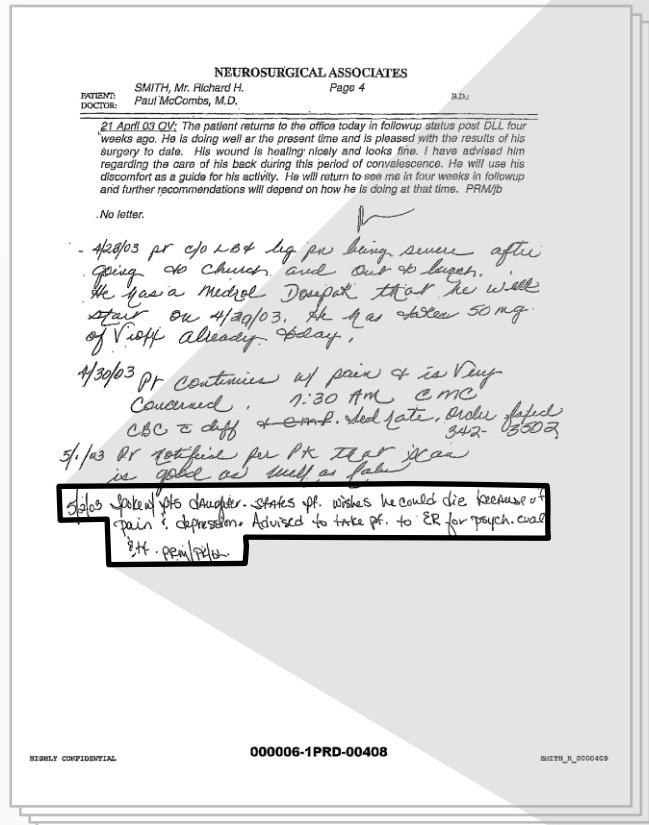
Smith: Oh, he's been so sick.
Oh (crying).

* * *

Smith: I'm trying to call the other – one other one. (Crying). He was so, he was so sick and everything wrong with him.

May 2, 2003

Neurosurgical Associates Notes – Dr. McCombs



Spoke w[ith] p[atiens]t's daughter. States p[atiens]t wishes he could die because of pain and depression. Advised to take p[atiens]t to ER for psych. eval and tx [treatment].

May 13, 2004 Police Report

Complaint # 04-240830
Off/Class: Death-Suicide
Victim: Richard H. Smith
Date: 5-13-04

Metropolitan Police Department
Homicide Unit
Supplement Report

On 5-13-04 at 0620 hours I arrived at 1443 Janie Avenue in response to the above victim being deceased due to a gunshot wound. I immediately interviewed the victim's wife, Ruth Brown Smith. Mrs. Smith states that about one year ago, the victim had hip and knee replacement surgery and has been in constant pain since that time. On 3-1-04, the victim mentioned to his daughter, Cindy Smith, that he might take his own life. On the night of 3-1-04, Mrs. Smith slept upstairs while the victim slept downstairs. About 0500 hours, Mrs. Smith came downstairs and saw that there was a light in the victim's room. The victim came into the den where Mrs. Smith was lying on the couch. The victim went back into his bedroom. Mrs. Smith heard a gunshot and found the victim's bedroom door to be locked. Mrs. Smith was able to get the door unlocked and found the victim on the floor in the bedroom.

I then went into the victim's bedroom and observed the victim sitting on the floor beside the bed. There was a white plastic bag on the bed and a large amount of blood on the bed and floor near the bed. There was also a bullet hole in the wall to the left of the victim over the headboard of the bed. There was a note on the dresser that indicated that the victim had caused his own death. This note was collected and turned into property room. There was a Smith & Wesson .38 caliber revolver (ser. #406944) lying on the floor near the victim's feet. There was one spent round in the cylinder and five live rounds. The victim was holding a pillow. The victim was dressed in pajamas and was wearing black house shoes and socks. It appears that the victim had placed the plastic bag on the bed to prevent the soiling of the bed with biohazard material. Further examination revealed a gunshot wound to the right side of the victim's head and an exit wound to the left side of the victim's head. This is also consistent with the location of the bullet hole in the wall to the left of the victim. The victim and his wife were the only people in the residence at the time of this incident. There were no signs of forced entry into the residence. There are also no indications of anything other than a self-inflicted gunshot wound.

Det. Danny Setterfield
C.I.D./Homicide

Danny Settler L75P
5-13-04

000006-96MNP-00010

Metropolitan Police Department

* * *

On 3-1-04, the victim mentioned to his daughter, Cindy Smith, that he might take his own life.

Pain has taken over my Mind & Body

I need Back Surgery

Left & Right Rotator Cuffs

Right Bicep Torn

Back Surgery to Correct Pain in Legs

Forgive me, I cannot go on like this!

I cannot have my body, the temple
of the Holy Spirit cut on anymore

I have talked to God almighty and

He understands,